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Congress of the United States
House of Representatives

INTERNATIONAL RELATIONS COMMITTEE

Subcommittee on Asia and the Pacific
Subcommittee on International Terrorism,
Nonproliferation and Human Rights

GOVERNMENT REFORM COMMITTEE

Subcommittee on Wellness and Human Rights,
Ranking Minority Member
Subcommittee on Technology, Information
Policy, Intergovernmental Relations and the
Census

CONGRESSIONAL CASEWORK AUTHORIZATION FORM

Please Type or Print Only

Name: Mr. Mrs. Ms. _____

Address: _____ City: _____ Zip: _____

Telephone: (Home) _____ (Work) _____

Social Security Number: _____ Date of Birth _____

Federal Agency Involved: _____

I request the assistance of Congresswoman Diane E. Watson in the following federal matter:
(Please provide a brief explanation of your problem and attach photocopies of documents
relevant to this case. Use additional paper as necessary.)

Please answer the following questions:

Have you previously contacted our office regarding this matter?	Yes	No
Have you appealed the agency decision on this matter?	Yes	No
Are you represented by an attorney in this matter?	Yes	No
If so, may we discuss your case with your attorney?	Yes	No

Name of Attorney _____ Telephone: _____

Congresswoman Watson and her staff may discuss my case with the following individuals:

In accordance with the Privacy Act of 1974, I authorize Congresswoman Watson and her staff to
act on my behalf to transmit and/or receive information pertinent to my request for assistance.
Also, I understand that I am not required to make payment, in any form, for services rendered to
me from the Office of Congresswoman Diane E. Watson.

Signed: _____ Date: _____